POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.P.		3-8-00
O.I.P.E. CLASSIFIER			5-15
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	Jun	C4830	4-25

INDEX OF CLAIMS

✔	Rejected	N	Non-elected
=	Allowed	I	Interference
– (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim		Date
Final	Original	
	1	✔ ✔ ✔ ✔ ✔ ✔
	2	✔ ✔ ✔ ✔
	3	✔ ✔ ✔ ✔
	4	✔ ✔ ✔ ✔
	5	✔ ✔ ✔ ✔
	6	✔ ✔ ✔ ✔
	7	✔ ✔ ✔ ✔
	8	✔ ✔ ✔ ✔
	9	✔ ✔ ✔ ✔
	10	✔ ✔ ✔
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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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